Please cite this publication as follows:


Link to official URL (if available):

http://dx.doi.org/10.1080/17533015.2015.1065594

This version is made available in accordance with publishers’ policies. All material made available by CReaTE is protected by intellectual property law, including copyright law. Any use made of the contents should comply with the relevant law.

Contact: create.library@canterbury.ac.uk
EDITORIAL
The health and well-being potential of museums and art galleries

Participation in creative cultural activities has received increasing attention by researchers and policy makers and is considered by some as an important new focus for public health programmes and research (Clift & Camic, 2015; Cuypers et al., 2012; O’Neil, 2010). In recent years, many museums, including art galleries, have broadened their services to include those directed towards improving health and well-being. The museums sector has responded to the global trend of increased awareness of health and well-being challenges by creating programmes for older adults, people with dementia and mental health service users, to name but a few (Chatterjee & Noble, 2013). In the United States, for example, the Museum of Modern Art established the first known art gallery-based programme for people with dementia and their family caregivers (Rosenberg, 2009), whilst in Europe, London’s Dulwich Picture Gallery has one of the most longstanding and comprehensive programmes for older people (Harper & Hamblin, 2010), which includes a ‘art on prescription’ programme with local area physicians.

A growing body of evidence suggests that cultural participation enhances human health and well-being (e.g. Bygren et al., 2009; Camic & Chatterjee, 2013; Clift et al., 2009; Konlaan, Bygren, & Johansson, 2000; Napier et al., 2014; Staricoff, 2004, 2006; Staricoff, Duncan, Wright, Loppert, & Scott, 2001); however, robust studies regarding the efficacy of museum encounters are limited (Chatterjee & Noble, 2013). Notwithstanding this shortfall, when analysed and valued in a multi-dimensional, multi-attribute and multi-value socio-economic environment, cultural heritage is widely accepted as an important facet of society in providing cultural references for populations and local communities, and also as an economic asset that provides jobs through tourism (Mazzanti, 2002).

Museums are increasingly playing a role in improving health and well-being (Dodd & Jones, 2014) and evidence shows that engaging with museums provides: positive social experiences, leading to reduced social isolation; opportunities for learning and acquiring news skills; calming experiences, leading to decreased anxiety; increased positive emotions, such as optimism, hope and enjoyment; increased self-esteem and sense of identity; increased inspiration and opportunities for meaning making; positive distraction from clinical environments, including hospitals and care homes; and increased communication among families, caregivers and health professional (Chatterjee & Noble, 2013). Studies of museum object handling, for example, show significant benefits for a range of patients in hospitals and care homes by improving mental and physical functioning, providing a positive experience during the hospital stay, and improving patient–doctor/carer communication (Ander, Thomson, Blair, et al., 2013; Ander, Thomson, Noble, et al., 2013; Chatterjee, Vreeland, & Noble, 2009; Lanceley et al., 2012; Paddon et al., 2013; Solway, Camic, Thomson, & Chatterjee, 2015; Thomson & Chatterjee, 2014a, 2014b; Thomson et al., 2012a, 2012b). Specific population groups and issues that museums have sought to address include children on the autism spectrum (Dunn, 2013; Yale Center for British Art, 2015), learning disabilities (Sullivan, 2015), cancer patients (Thomson et al., 2012a) and severe mental health problems (Ander, Thomson, Noble, 2013; Colbert, Cooke, Camic, & Springham, 2013).

Camic and Chatterjee (2013) propose a framework whereby museums develop strategic partnerships with local healthcare authorities, health-care funders and other local...
museums and galleries to coordinate health and well-being programmes. Such programmes could offer an 'on prescription' referral service designed and delivered in partnership with health and social care organisations, and methods have even been developed to evaluate the efficacy of such programmes in the form of a Museums Wellbeing Measure (Thomson & Chatterjee, 2014a, 2014b, 2015).

This special issue of Arts & Health seeks to help fill the current evidence gap by presenting a number of studies that contribute to a nuanced understanding of the relationship between cultural heritage engagement and a range of health and well-being outcomes. Expansion of this evidence base is crucial if museums, and the wider cultural sector, are to demonstrate their value to society in the health and well-being arena, but considerable opportunities, as well as challenges, exist for such organisations and their audiences if they choose to adapt and expand their offerings.

References


Colbert, S. M., Cooke, A., Camic, P. M., & Springham, N. (2013). The art-gallery as a resource for recovery for people who have experienced psychosis. The Arts in Psychotherapy, 40, 250–256. doi:10.1016/j.apt.2013.03.003


